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Fill in this information to identify yo	ur case:
United States Bankruptcy Court fo	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name	Allante			
	Write the name that is on your	First name	First name		
	government-issued picture identification (for example, your	Sherese			
	driver's license or passport).	Middle name	Middle name		
	Bring your picture identification	Talbert			
	to your meeting with the trustee.	Last name	Last name		
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)		
2.	All other names you have				
	used in the last 8 years	First name	First name		
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name		
	names.	Last name	Last name		
	Do NOT list the name of any				
	separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)		
		Business name (if applicable)	Business name (if applicable)		
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>1</u> <u>9</u> <u>7</u> <u>3</u>	xxx - xx		
	federal Individual Taxpayer	OR	OR		
	Identification number (ITIN)	9xx - xx	9xx - xx		

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Deb	otor 1 Allante	Sherese	Talbert	Case number (if known)				
	First Name	Middle Name	Last Name		(
		About Debtor 1	:	About Debtor 2 (Spo	ouse Only in a Joint Case):			
4.								
	Number (EIN), if any.	EIN		EIN				
5.	Where you live			If Debtor 2 lives at a	different address:			
		2027 S Bouvie	r St					
		Number St	reet	Number Street				
		Philadelphia, F	PA 19145-2909					
		City	State ZIP Code	City	State ZIP Code			
		Philadelphia						
		County		County				
			address is different from the one above te that the court will send any notices to ng address.		address is different from yours, fill he court will send any notices to you ss.			
		Number Str	reet	Number Street	_			
		P.O. Box		P.O. Box				
		City	State ZIP Code	City	State ZIP Code			
6.	Why you are choosing this	Check one:		Check one:				
	district to file for bankruptcy	Over the las have lived in district.	et 180 days before filing this petition, I n this district longer than in any other	Over the last 180 have lived in this district.	days before filing this petition, I district longer than in any other			
		I have anoth (See 28 U.S	ner reason. Explain. S.C. § 1408)	I have another re (See 28 U.S.C. §				

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Talbert

Deb	tor 1	Allante	Sherese	Talbert		Case nun	nber (if known)
		First Name	Middle Na	ime Last Name	e		
Par	t 2: Tell th	e Court About You	ır Bankı	ruptcy Case			
7.		r of the Bankruptcy re choosing to file	Bankrup Ct Ct Ct		tion of each, see <i>Notice Rec</i> go to the top of page 1 and		§ 342(b) for Individuals Filing for ate box.
8.	How you wi	II pay the fee	deta chec a cre l nec to P l rec judg offic choc	ills about how you may ck, or money order. If you edit card or check with a set to pay the fee in instay The Filing Fee in Instaut that my fee be water may, but is not requirial poverty line that app	pay. Typically, if you are payour attorney is submitting you a pre-printed address. Italiments. If you choose this stallments (Official Form 103 aived (You may request this ed to, waive your fee, and rollies to your family size and st fill out the <i>Application to H</i>	ying the fee yourse our payment on you so option, sign and a BA). option only if you a nay do so only if yo you are unable to p	k's office in your local court for more f, you may pay with cash, cashier's r behalf, your attorney may pay with ttach the <i>Application for Individuals</i> re filing for Chapter 7. By law, a ur income is less than 150% of the ay the fee in installments). If you <i>Filing Fee Waived</i> (Official Form
9.	Have you fi within the la	led for bankruptcy ast 8 years?	☑No.	District District District	Wher Wher	MM / DD / YYYY MM / DD / YYYY	Case number Case number Case number
10.	pending or spouse who case with ye	nkruptcy cases being filed by a b is not filing this bu, or by a artner, or by an	☑No. □Yes.	District	When M When	M / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
					M	M / DD / YYYY	
11.	Do you ren	your residence?	✓ No. ☐ Yes.	No. Go to line 12	l Statement About an Evicti		st You (Form 101A) and file it

Debtor 1

Allante

Sherese

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Debtor 1 Allante		Sherese Talbert				Case number (if known)				
	First Name	Midd	le Name	Last Name			,			
Par	t 3: Report About Any Busin	esse	s You O	wn as a Sole Pro	oprietor					
12.	Are you a sole proprietor of	√	No. Go to	Part 4.						
	any full- or part-time business?		Yes. Nam	e and location of bu	siness					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Name of business, if any							
	corporation, partnership, or LLC.		Number	Street						
	If you have more than one sole proprietorship, use a separate sheet and attach it to this	·								
	petition.		City			State	ZIP Code			
			Check the appropriate box to describe your business:							
			Healtl	n Care Business (as	defined in 11 U.S.C	C. § 101(27A))			
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))								
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))								
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))								
		☐ None of the above								
11 of the Bankruptcy Code, and are you a <i>small business</i> debt debtor or a debtor as defined of or			If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).							
	For a definition of small business		No. I	am not filing under (Chapter 11.					
	debtor, see 11 U.S.C. § 101(51D).			am filing under Cha ankruptcy Code.	pter 11, but I am NC	T a small bu	usiness debtor according to the definition in the			
							ebtor according to the definition in the der Subchapter V of Chapter 11.			
					pter 11, I am a debto o proceed under Su		to the definition in § 1182(1) of the Bankruptcy of Chapter 11.			

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Deb	tor 1	Allante	Sherese	Talbert	Case number (if known)
		First Name	Middle Name	Last Name	
Par	t 4: Repor	t if You Own or H	ave Any Hazar	dous Property or	Any Property That Needs Immediate Attention
14.	Do you owi	n or have any	☑ No.		
	property that poses or is alleged to pose a threat of	Yes. Wha	at is the hazard?		
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?				
			Or do you own any		
				mediate attention is	needed, why is it needed?
		e, do you own oods, or livestock			
	that must be fed, or a building that needs urgent repairs?				
			\\/\be	are in the property?	
			vvne	ere is the property?	Number Street

City

State

ZIP Code

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Debtor 1	Allante	Sherese	Talbert	Case number (if known)
	First Name	Middle Name	Last Name	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1		Allante	Sheres	ese Talbert		Case number (if known)			
		First Name	Middle N	lame Last Name				,	
Dan	A 10 0 10 10 10 10 10 10 10 10 10 10 10 1	There Overtion	- f D	anastina Dumasa					
Par	t 6: Answer	These Question	STOFR	eporting Purposes					
16.	What kind of have?	debts do you	16a.			er debts? Consumer debts are defi for a personal, family, or household			
			16b.			s debts? Business debts are debts ough the operation of the business			
			16c.	State the type of debts you ow	e th	at are not consumer debts or busine	ess d	ebts.	
17.	Are you filing	g under Chapter 7?	A	No. I am not filing under Cha	pter	7. Go to line 18.			
	exempt prop and administ paid that fun	nate that after any erty is excluded trative expenses ard ds will be available on to unsecured							
18.	How many control estimate that	reditors do you t you owe?	V	1-49	000				
19.	How much d	o you estimate you worth?	r 🔰	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	liabilities to I		r 🗆 Ø	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
	Ü								
Foi	ryou	If I have States C If no atto have obt I reques: I unders bankrup; and 357	chosen fode. I un orney represented and matery case 1.	to file under Chapter 7, I am aw inderstand the relief available un presents me and I did not pay of ind read the notice required by 1 in accordance with the chapter of king a false statement, conceali	varender rag 1 U f title	each chapter, and I choose to procree to pay someone who is not an a	r Cha eed u ttorna in this	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I spetition. by fraud in connection with a	
		· -		erese Talbert, Debtor 1					
		Ex	cecuted	on 03/15/2024					
				MM/ DD/ YYYY					

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Debtor 1	Allante	Sherese	Talbert	Case number (if known)
	First Name	Middle Name	Last Name	
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under each chapter for 11 U.S.C. § 342	Chapter 7, 11, 12, or 13 of r which the person is eligil 2(b) and, in a case in whicl	this petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ole. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
		X /s/ Michae	el A. Cibik	Date 03/15/2024
		· -	of Attorney for Debtor	MM / DD / YYYY
		Michael A Printed nan Cibik Law Firm name 1500 Walr	ne	
		Number	Street	
		Philadelpl	nia	PA 19102
		City		State ZIP Code
		Contact pho	one (215) 735-1060	Email address mail@cibiklaw.com
		23110		PA
		Bar numbe	r	State

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			<u>D</u>	ocument F	Page 9 of 46		
Fill in t	his informa	ation to identify yo	ur case and this filing	g:			
Debtor	1	Allante	Sherese	Talbert			
		First Name	Middle Name	Last Name		-	
Debtor	2					_	
(Spouse	e, if filing)	First Name	Middle Name	Last Name			
United	States Ban	kruptcy Court for the	e: Eastern	District of	f Pennsylvania		
Case r	number					_	Check if this is an
							amended filing
Offic	ial Fori	m 106A/B					
Sch	edule	A/B: Pro	nerty				12/15
				l !at an assat and			
					y once. If an asset fits e as possible. If two m		
equally	responsi	ble for supplying	correct information	n. If more space	s needed, attach a se		
addition	nal pages	, write your name	e and case number	(if known). Answ	er every question.		
Part	1: De	escribe Each R	Residence, Buildii	ng, Land, or Ot	her Real Estate You	u Own or Have an I	nterest In
1.	Do you ov	vn or have any lega	al or equitable interes	in any residence,	building, land, or similar	property?	
	☑ No. Go	to Part 2.					
	Yes. W	here is the property	?				
2.	Add the de	ollar value of the p	ortion you own for all	of your entries from	m Part 1, including any e	ntries for pages	\$0.00
	you have	attached for Part 1	. Write that number he	ere		-	
Part	2· De	escribe Your V	ehicles				
- Tart	2.		Cilicies				
-		. •	•	•	er they are registered or lee G: Executory Contracts	•	
3.	Cars, vans	s, trucks, tractors,	sport utility vehicles,	motorcycles			
	√ No						
	☐ Yes						
4.		•	,		es, other vehicles, and a		
	Examples: ✓ No	Boats, trailers, mot	ors, personal watercraft	, fishing vessels, sno	owmobiles, motorcycle acc	cessories	
	Yes						
5.					m Part 2, including any e		\$0.00
	you have	attached for Part 2	. Write that number he	ere		————	73.30
Part	3: De	escribe Your P	ersonal and Hous	sehold Items			

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Do you own or have any legal or equitable

interest in any of the following items?

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Debtor Talbert, Allante Sherese

Case number (if known)

6.	Household goods and furn	-							
	Examples: Major appliance	ss, furniture, linens, china, kitchenware							
	☐ No								
	✓ Yes. Describe	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$950.00						
7.		radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music tronic devices including cell phones, cameras, media players, games							
	□ No								
	Yes. Describe	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$350.00						
8.	Collectibles of value								
		gurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ollections; other collections, memorabilia, collectibles							
	₫ No								
	Yes. Describe								
9.	Equipment for sports and	hobbies							
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments								
	√ No								
	Yes. Describe								
10.	Firearms Examples: Pistols, rifles, sh	notguns, ammunition, and related equipment							
	√ No								
	Yes. Describe								
11.	Clothes								
	Examples: Everyday clothe	es, furs, leather coats, designer wear, shoes, accessories							
	☐ No								
	√ Yes. Describe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$250.00						
12.	Jewelry								
		y, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,							
	☐ No								
	Yes. Describe	Various used pieces of jewelry.	\$75.00						
13.	Non-farm animals Examples: Dogs, cats, bird	s, horses							
	✓ No								
	Yes. Describe								
14.	Any other personal and ho	ousehold items you did not already list, including any health aids you did not list							
	☑ No								
	Yes. Give specific information								

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Case number (if known)

15.				s, including any entries for pages you have attached	\$1,625.00
Pa	rt 4:	Describe Y	our Financial Assets		
Do y	ou own oi	have any legal	l or equitable interest in any c	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	s: Money you h	nave in your wallet, in your home	e, in a safe deposit box, and on hand when you file your petition	
	√ No				
	☐ Yes.			Cash:	
17.	Deposits	of money			
	Example	•	•	nts; certificates of deposit; shares in credit unions, brokerage houses, ultiple accounts with the same institution, list each.	
	☐ No				
	✓ Yes.			Institution name:	
			17.1. Checking account:	Citibank	\$61.79
			17.2. Checking account:	Pennsylvania State Employees Credit Union	\$447.09
			17.3. Checking account:	Santander	\$124.74
			17.4. Other financial account:	Pennsylvania State Employees Credit Union (share)	\$6.15
18.	Bonds, r	nutual funds, o	r publicly traded stocks		
	Example	s: Bond funds,	investment accounts with broke	erage firms, money market accounts	
	√ No				
	Yes .				
19.		licly traded sto tnership, and jo		ted and unincorporated businesses, including an interest in an	
	√ No				
	inforr	Give specific nation about			
20.	Governn	nent and corpo	rate bonds and other negotial	ble and non-negotiable instruments	
				s' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	√ No				
	inforr	Give specific nation about			

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Case number (if known)

irement or pension			
amples: Interests in			
	IRA, ERISA, Keogh, 40°	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No			
Yes. List each account separately.	Type of account:	Institution name:	
	401(k) or similar plan:	Vanguard	\$56,187.58
curity deposits and	prepayments		
r share of all unused	l deposits you have mad	le so that you may continue service or use from a company	
amples: Agreements others	with landlords, prepaid	rent, public utilities (electric, gas, water), telecommunications companies, or	
No			
Yes			
nuities (A contract fo	or a periodic payment of	money to you, either for life or for a number of years)	
No			
Yes			
		in a qualified ABLE program, or under a qualified state tuition program.	
No			
Yes			
sts, equitable or fut your benefit	ture interests in prope	rty (other than anything listed in line 1), and rights or powers exercisable	
No			
Yes. Give specific information about the	em		
ents, copyrights, tra	ademarks, trade secre	ts, and other intellectual property	
amples: Internet don	nain names, websites, p	roceeds from royalties and licensing agreements	
No			
Yes. Give specific information about the	em		
enses, franchises, a	and other general intar	ngibles	
amples: Building per	mits, exclusive licenses	, cooperative association holdings, liquor licenses, professional licenses	
No			
Yes. Give specific information about the	em		
property owed to y	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
refunds owed to yo	ou		, , , , , ,
	Yes. List each account separately. urity deposits and r share of all unused mples: Agreements others No Yes	Yes. List each account separately. Type of account: 401(k) or similar plan: urity deposits and prepayments r share of all unused deposits you have made apples: Agreements with landlords, prepaid others No Yes urities (A contract for a periodic payment of No Yes rests in an education IRA, in an account of J.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Yes sts, equitable or future interests in property our benefit No Yes. Give specific information about them ents, copyrights, trademarks, trade secre apples: Internet domain names, websites, powers. Give specific information about them ents, cive specific information about them ents, cive specific information about them entses, franchises, and other general intar apples: Building permits, exclusive licenses.	Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Yanguard writy deposits and prepayments rishare of all unused deposits you have made so that you may continue service or use from a company mples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes

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Debtor Talbert, Allante Sherese Case number (if known)

	₫ No			
	Yes. Give specific information about them, including whether you			
	already filed the returns and			
	the tax years			
29.	Family support			
	Examples: Past due or lump sum alimony, settlement	spousal support, child support, m	naintenance, divorce settlement, property	
	☑ No			
	Yes. Give specific information			
30.	Other amounts someone owes you			
		ance payments, disability benefits, d loans you made to someone else	sick pay, vacation pay, workers' compensation e	,
	√ No			
	Yes. Give specific information			
31.	Interests in insurance policies			
	Examples: Health, disability, or life insuran	ce; health savings account (HSA);	credit, homeowner's, or renter's insurance	
	No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		Erie Family Life Insurance		\$295.71
32.	Any interest in preparty that is due you	from compone who has died		
32.	Any interest in property that is due you all fyou are the beneficiary of a living trust, exproperty because someone has died.		ce policy, or are currently entitled to receive	
	√ No			
	Yes. Give specific information			
33.	Claims against third parties, whether or	not you have filed a lawsuit or r	made a demand for payment	
	Examples: Accidents, employment dispute	es, insurance claims, or rights to se	ue	
	☑ No			
	Yes. Describe each claim			
34.	Other contingent and unliquidated claim claims	s of every nature, including cou	unterclaims of the debtor and rights to set o	off
	☑ No			
	Yes. Describe each claim			
35.	Any financial assets you did not already	list		
	√ No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$57,123.06
Pa	rt 5: Describe Any Business-	Related Property You Ow	vn or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitab	ole interest in any business-relat	ted property?	
	☑ No. Go to Part 6.			
	Yes. Go to line 38.			

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Debtor Talbert, Allante Sherese Case number (if known)

45.		dollar value of all of your entries from Part 5, inclu 5. Write that number here			\$0.00
Pa	rt 6:	Describe Any Farm- and Commercial F	-	perty You Own or Have an I	nterest In.
46.	Do you	own or have any legal or equitable interest in any fa	arm- or commercial fishir	g-related property?	
	√ No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
52.	\$0.00				
Pa	rt 7:	Describe All Property You Own or Hav	e an Interest in Tha	t You Did Not List Above	
53.	Do you	have other property of any kind you did not already	/ list?		
	Example	es: Season tickets, country club membership			
	√ No				
	_	Give specific mation			
54.	Add the	dollar value of all of your entries from Part 7. Write	that number here	→	\$0.00
Pa	rt 8:	List the Totals of Each Part of this For	rm		
55.	Part 1: 1	Total real estate, line 2		→	\$0.00
56.	Part 2: 1	Total vehicles, line 5	\$0.00		
57.	Part 3: 1	Total personal and household items, line 15	\$1,625.00		
58.	Part 4: 1	Total financial assets, line 36	\$57,123.06		
59.	Part 5: 1	Total business-related property, line 45	\$0.00		
60.	Part 6: 1	Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: 1	Total other property not listed, line 54	+ \$0.00		
62.	Total pe	ersonal property. Add lines 56 through 61	\$58,748.06	Copy personal property total	+ \$58,748.06
63.	Total of	all property on Schedule A/B. Add line 55 + line 62.			\$58,748.06

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		'	Document 1	age 19 01 40	
Fill in this information	to identify your ca	se:			
Debtor 1	Allante	Sherese	Talbert		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	ruptcy Court for the	Eas	tern District of Penns	sylvania	
Case number (if known)					Check if this is an amended filing
Official Form	106C				
Schedule (C: The Pr	operty Yo	u Claim as	Exempt	04/2
		operty Yo	u Claim as	s Exempt	amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as	Exempt								
 Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. 1. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. 									
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption						
Brief description: Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less. Line from Schedule A/B: 6	\$950.00	\$950.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)						
Brief description: Various used televisions, mobile devices, and computers, each valued at \$600 or less. Line from Schedule A/B: 7	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)						
3. Are you claiming a homestead exemption of r (Subject to adjustment on 4/01/25 and every 3 ✓ No ☐ Yes. Did you acquire the property covered by ☐ No ☐ Yes	years after that for cases f	,							

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Debtor 1 Allante Sherese Talbert Case number (if known) _____

Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Various used articles of clothing, shoes, and accessories, each valued at \$600 or less. Line from Schedule A/B:11	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: Various used pieces of jewelry. Line from Schedule A/B:12	\$75.00	\$75.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)
Brief description: Santander Checking account Line from Schedule A/B: 17	\$124.74	\$124.74 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Citibank Checking account Line from Schedule A/B: 17	\$61.79	\$61.79 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Pennsylvania State Employees Credit Union (share) Other financial account Line from Schedule A/B: 17	\$6.15	\$6.15 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Pennsylvania State Employees Credit Union Checking account Line from Schedule A/B:17	\$447.09	\$447.09 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Brief description: Vanguard Line from Schedule A/B: 21	\$56,187.58	\$56,187.58 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(12)
Brief description: Erie Family Life Insurance Line from Schedule A/B: 31	\$295.71	\$295.71 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(8)

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Debtor 1	Allante	Sherese	Talbert	Case numbe	r (if known)
	First Name	Middle Name	Last Name		. (
Part 2: Add	litional Page				
•	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.		

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			Document	Page 18 of 4	<u>6</u>		
Fill in this inform	nation to identify your						
Debtor 1	Allante	Sherese	Talbert				
Debior 1	First Name	Middle Name	Last Name				
Dahtar 2							
Debtor 2 (Spouse, if filing)	Firet Name	Middle Name	Last Name				
		_					
United States I	Bankruptcy Court for	the: Easte	rn Distr	rict of Pennsylvania	<u>a </u>		
Case number ((if			<u></u>			
known)							if this is an ed filing
00000	400D						
Official For	m 106D						
Schedu	le D: Cred	ditors Who	Have C	laims Sec	cured by	Property	12/15
Be as complete	and accurate as po	ssible. If two married	people are filing t	ogether, both are eg	ually responsible fo	or supplying correct in	formation. If
nore space is n	eeded, copy the Ad					pp of any additional pa	
	number (if known).						
		ecured by your prope	•				
			t with your other scl	nedules. You have not	hing else to report of	n this form.	
☐ Yes. Fill	in all of the information	on below.					
Part 1:	List All Secured (Claims					
2. List all sec	nured eleime. If a are	ditar has more than a	as assured alaim li	at the graditor	Column A	Column B	Column C
		editor has more than or e than one creditor ha			Amount of claim	Value of collateral	Unsecured
creditors in	Part 2. As much as p	oossible, list the claims	•		Do not deduct the	that supports this	portion
creditor's na	ame.				value of collateral.	claim	If any
2.1		Describe	the property that	secures the claim:			
Creditor's	Name				_		
Number	Street	As of the	date you file the	claim is: Check all tha	at apply		
		Contin	-	ordini io. Oriook ali tile	и арріу.		
		Unliqu	0				
City	State Z	IP Code Disput					
Who owe	s the debt? Check o		lien. Check all tha	t apply.			
☐ Debto	r 1 only	☐ An ag	reement you made	(such as mortgage or	secured car loan)		
☐ Debto	•		•	(lien, mechanic's lien)			
-	r 1 and Debtor 2 only		nent lien from a law				
At leas	st one of the debtors	and Other offset)	(including a right to				
	c if this claim relates nunity debt	s to a					
Data dahi	was incurred	Last 4 die	rite of account nu	mbor			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

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Case number (if known)

Talbert

Sherese

Middle Name First Name Last Name Column A Column B Column C Additional Page Value of collateral Amount of claim Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the followed by 2.4, and so forth. claim value of collateral. If any 2.2 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code City State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or secured car loan) ■ Debtor 1 only Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit ■ At least one of the debtors and Other (including a right to another offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: \$0.00 If this is the last page of your form, add the dollar value totals from all pages. \$0.00

Debtor 1

Allante

Write that number here:

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=::::::::::::::::::::::::::::::::::::::				Do	cument	Pac	ne 20 of	46 46				-
Fill in this	informa	ition to identify your ca	ase:									
Debtor 1	_	Allante	Sherese		Talbert							
		First Name	Middle Nam	ne	Last Name							
Debtor 2	<u>)</u>											
(Spouse,	if filing)	First Name	Middle Nam	ne	Last Name							
Llmita d C	totoo D	and an interior Count for the		Eastern	Dis	strict of	Pennsylvar	nia				
Officed S	olales Da	ankruptcy Court for the	ð	Luctom		_	1 Omnoyivan	<u></u>				
Case nu	-										Chock if	this is an
(if known))									_	amende	
Official	LEorn	106E/E										-
Onicia	FOIII	n 106E/F										
Sche	edul	e E/F: Cre	ditors	s Who	o Have	e Un	secur	ed Cla	nims			12/15
			ilata Maa Ba		alita na sociale D	DIODITY	/ -1-:	D(0 f	alitana mista NOI	IDDIO	NTV -1-:-	1:
	•	nd accurate as poss executory contracts										
•		d on Schedule G: Ex	•					•				
		ted in Schedule D: 0						•	·	•		,
number th number (if		es in the boxes on th	e left. Attach	n the Cont	tinuation Pag	e to this	page. On the	top of any a	idditional pages	, write	your nan	ne and case
idilibei (ii	KIIOWII	7.										
Part 1	: Li	st All of Your PRIC	ORITY Uns	ecured (Claims							
1. Do a	nv cred	litors have priority u	nsecured cla	aims agair	nst vou?							
	-	o Part 2.			,							
<u> </u>		0 T dit 2.										
	-	our priority unsecure identify what type of c				•	•		•	•		
		much as possible, list				•	•				•	
fill o	ut the Co	ontinuation Page of Page	art 1. If more	than one c	reditor holds a	a particula	ar claim, list th	ne other credit	tors in Part 3.			
(For	an expla	anation of each type o	f claim, see t	he instruct	ions for this fo	orm in the	instruction be	ooklet.)				
`	•	,,						,	Total claim	Drios		Nonnriority
									Total Claim	Prior amo	•	Nonpriority amount
2.1 Inte	ornal Da	venue Service		act 4 digi	its of account	t numbor			\$859.81		¢050 01	\$0.00
1110		ditor's Name	·	Last 4 uigi	ils of account	t mumber		——	Ψουθ.σ1		\$859.81	\$0.00
		Insolvency Operation		When was	the debt incu	urred?						
		•	<u> </u>									
	Box 73			No of the	data van fila	the eleim	ia. Chaak al	I that apply				
	nber	Street		_	date you file,	tne claim	is: Check a	тпат арріу.				
City		a, PA 19101-7346 State Z		⊒ Contino ⊒ Unliqui	•							
•			1	Dispute								
		red the debt? Check	one.	_ Бюрак	Ju							
	Debtor	•			RIORITY unse		aim:					
	Debtor 2				tic support obl							
		1 and Debtor 2 only			and certain oth		•	-				
_		one of the debtors an	,		for death or p	ersonal ir	njury while yo	u were intoxic	ated			
		if this claim is for a mity debt	Į	Other.	Specify				_			
		subject to offcot?										

✓ No ☐ Yes

)ebto	or 1	Case 24-108 Allante First Name	Shere Middle	se	Doci Tall	03/15/24 ument pert Name	Entere Page 21					:08	Desc M	ain
Pá	art 2:	List All of Your	NONPRIC	ORITY Ur	nsecured	d Claims								
3.	_	creditors have nonp	•		•	•	t with your otl	ner schedul	es.					
4.	nonprior included	of your nonpriority of the state of the stat	list the cred an one cred	litor separa itor holds a	ately for ea	ich claim. For	each claim lis	sted, identif	y what	t type	of cla	aim it is	. Do not list cla	ims already
														Total claim
4.1	Best E	igg				Last 4 digit	s of account	number	8	5	4	2		\$1,742.00
	Nonprio	ority Creditor's Name				When was	the debt incu	urrod?		11/1	/2022	,		
	1523 C	Concord Pike Suite 20	01			when was	ine debi inci	irreur		11/1	12022			
	Numbe	er Street				A = = £ (); = =1	-1	l	01-	-111	1 41 4			
							ate you file, t	ne ciaim is	: Cne	ck all	tnat	арріу.		
	Wilmin	ngton, DE 19803				☐ Continge☐ Unliquid								
	City	Stat	ie	ZI	IP Code	☐ Disputed								
	Who in	ncurred the debt? Cl	neck one.			·								
	₫ Del	btor 1 only					NPRIORITY I	unsecured	claim):				
	☐ Del	btor 2 only				Student								
		btor 1 and Debtor 2 o	,			U Obligation	•	t of a sepai	ation	agree	ement	or dive	orce that you di	d not report as
		east one of the debto					pension or p	rofit-sharing	plans	s, and	d othe	r simila	ar debts	
	☐ Che	eck if this claim is fo	or a commi	unity debt	İ		pecify Credi						_	
	Is the o	claim subject to offs	et?											
	√ No													
	☐ Yes	3												
4.2	Capita	I One				Last 4 digit	s of account	number	7	0	8	2		\$3,505.00
	Nonprio	ority Creditor's Name				1471		10						
	Attn: B	Attn: Bankruptcy				wnen was	the debt incu	irred?		4/1/	2011			
	РО Во	x 30285												
	Numbe					_	ate you file, t	he claim is	: Che	ck all	that	apply.		
	Salt La	ake City, UT 84130-02	285			Continge								
	City	Stat	e	ZI	IP Code	Unliquid								
						Disputed	ı							

Who incurred the debt? Check one.

V	Debtor 1	only
	Debtor 2	only

☐ Debtor 1 and Debtor 2 only

 $\hfill \square$ At least one of the debtors and another

☐ Check if this claim is for a community debt

ls	the	claim	sub	iect	to	offse	t?

☑ No

Yes

Type of NONPRIORITY unsecured claim:

☑ Other. Specify CreditCard

☐ Obligations arising out of a separation agreement or divorce that you did not report as

priority claims

Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

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Debtor 1

Document Talbert Allante Sherese _ Case number (if known) _ First Name Middle Name Last Name

Part 2:	Your NONPRIORITY Unsecured	l Claims —	Continuation Page	
After listing	any entries on this page, number the	m beginning	g with 4.4, followed by 4.5, and so forth.	Total claim
4.3 Capital Nonprio Attn: Ba PO Boy Number Salt Lal City Who inc Deb Deb At le	One rity Creditor's Name ankruptcy 30285	ZIP Code	with 4.4, followed by 4.5, and so forth. Last 4 digits of account number 2 2 1 4 When was the debt incurred? 8/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you dispriority claims Debts to pension or profit-sharing plans, and other similar debts CreditCard	\$1,609.00
Nonprio Attn: Ba P.O. 15 Number Wilming City Who in Deb Deb At le	Card Services rity Creditor's Name ankruptcy :298	ZIP Code	Last 4 digits of account number 0 9 5 4 When was the debt incurred? 4/1/2016 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you dispriority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	\$5,139.00

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Middle Name

First Name

Last Name

Document Talbert Page 23 of 46 Debtor 1 Allante Sherese _ Case number (if known) _

Pa	rt 2: Your NONPRIORITY Unsecured Claims –	Continuation Page	
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim
4.5	Cherry Technologies Inc	Last 4 digits of account number 8 0 5	1 \$5,600.00
	Nonpriority Creditor's Name	When was the debt incurred? 5/1/2023	
	Attn: Bankruptcy	When was the dept incurred:	<u>, </u>
	2261 Market Street #4869	As of the date you file the claim is. Check all that	t apply
	Number Street	As of the date you file, the claim is: Check all that	арріу.
	San Francisco, CA 94114	☐ Contingent ☐ Unliquidated	
	City State ZIP Code	☐ Disputed	
	Who incurred the debt? Check one.	_ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only	Student loans	
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreemer priority claims 	it or divorce that you did not report as
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and oth	er similar debts
	☐ Check if this claim is for a community debt	☑ Other Specify InstallmentSalesContract	
	Is the claim subject to offset?		
	☑ No		
	☐ Yes		
4.6	Citibank	Last 4 digits of account number 0 0 7	8 \$1,877.00
	Nonpriority Creditor's Name	Lust 4 digits of docount number	Ψ1,077.00
	Citicorp Cr Srvs/Centralized Bankruptcy	When was the debt incurred? 9/1/2017	<u>?</u>
	PO Box 790040		
	Number Street	As of the date you file, the claim is: Check all that	apply.
	St Louis, MO 63179-0040	☐ Contingent	
	City State ZIP Code	Unliquidated	
	•	☐ Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	☑ Debtor 1 only ☐ Debtor 2 only	☐ Student loans	
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreemer 	nt or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims	,
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and oth	er similar debts
	•	☑ Other. Specify CreditCard	
	Is the claim subject to offset?		
	☑ No		
	Yes		
4.7	Comenity/Alphaeoncos	Last 4 digits of account number 4 5 1	7 \$2,583.00
	Nonpriority Creditor's Name	When was the debt incurred? 5/1/2023	3
	Attn: Bankruptcy	When was the dest incurred:	/
	PO Box 182125	A f the data was file the alabasia Obsahall that	
	Number Street	As of the date you file, the claim is: Check all that	арріу.
	Columbus, OH 43218	Contingent	
	City State ZIP Code	☐ Unliquidated☐ Disputed	
	Who incurred the debt? Check one.	_ Disputed	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	☐ Student loans	
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreemer	it or divorce that you did not report as
	At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and oth	er similar debts
	☐ Check if this claim is for a community debt	✓ Other. Specify ChargeAccount	
	Is the claim subject to offset?		
	☑ No		
	☐ Yes		

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Document Talbert Debtor 1

Sherese Allante __ Case number (if known) __ First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	orth.	Total claim		
4.8	Discover Financial	Last 4 digits of account number	2 5 3 4	\$11,335.00		
	Nonpriority Creditor's Name	When we the debt incomed?				
	Attn: Bankruptcy	When was the debt incurred?	3/1/2016			
	2500 Lake Cook Rd					
	Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Riverwoods, IL 60015-3851	☐ Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	✓ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	Debtor 2 only	☐ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a sepa	ration agreement or divorce	that you did not report as		
	☐ At least one of the debtors and another	priority claims	-			
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharin☑ Other. Specify CreditCard	g plans, and other similar de	bts		
	Is the claim subject to offset?					
	☑ No					
	Yes					
4.9	Macy's/ DSNB	Last 4 digits of account number	7 0 2 3	\$9,471.00		
	Nonpriority Creditor's Name	•				
	Atytn: Bankruptcy 701 E. 60th Street North	When was the debt incurred?	11/1/2015			
	Number Street					
		As of the date you file, the claim is	s: Check all that apply.			
	Sioux Falls, SD 57104	☐ Contingent				
	City State ZIP Code	Unliquidated				
	,	Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	claim:			
	Debtor 1 only	☐ Student loans	Ciaiiii.			
	Debtor 2 only		ration agreement or divorce	that you did not report as		
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	☑ Other. Specify ChargeAccount				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.10	MOUELA	Last A dissita of a second second second	0 0 0 0	¢4.4.400.00		
1.10	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0 0 0 2	\$14,496.00		
	' '	When was the debt incurred?	8/1/2022			
	Attn: Bankruptcy					
	633 Spirit Dr	As of the date you file, the claim is	s: Check all that apply.			
	Number Street	☐ Contingent	or or or an anat approx			
	Chesterfield, MO 63005-1243	Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claims				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☑ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	Debtor 1 and Debtor 2 only	priority claims	ration agreement of divorce	mat you did not report as		
	At least one of the debtors and another	Debts to pension or profit-sharin	g plans, and other similar de	bts		
	☐ Check if this claim is for a community debt	Other. Specify				
	Is the claim subject to offset?		_			
	☑ No					
	☐ Yes					

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Case nu

Allante Sherese

__ Case number (if known) ___

Debtor 1

First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page			
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.	Total claim	
4.11	MOHELA	Last 4 digits of account number	0 0 1 0	\$10,789.00	
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2019		
	Attn: Bankruptcy	when was the dept incurred?	6/1/2019		
	633 Spirit Dr	As of the date were file the plains in	or Oh a ale all that are also		
	Number Street	As of the date you file, the claim is	: Check all that apply.		
	Chesterfield, MO 63005-1243	☐ Contingent☐ Unliquidated			
	City State ZIP Code	☐ Disputed			
	Who incurred the debt? Check one.	☐ Disputed			
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:		
	Debtor 2 only	✓ Student loans			
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separ	ation agreement or divorce t	hat you did not report as	
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	n plans, and other similar del	nts	
	☐ Check if this claim is for a community debt	Other. Specify	•	7.0	
	Is the claim subject to offset?				
	✓ No				
	☐ Yes				
4.40					
4.12	MOHELA	Last 4 digits of account number	0 0 0 8	\$7,531.00	
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2018		
	Attn: Bankruptcy				
	633 Spirit Dr	As of the date you file, the claim is	: Check all that apply		
	Number Street	Contingent	. Oncor all that apply.		
	Chesterfield, MO 63005-1243	☐ Unliquidated			
	City State ZIP Code	☐ Disputed			
	Who incurred the debt? Check one.	·			
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:		
	☐ Debtor 2 only	☑ Student loans			
	☐ Debtor 1 and Debtor 2 only	 Obligations arising out of a separ priority claims 	ation agreement or divorce t	hat you did not report as	
	At least one of the debtors and another	Debts to pension or profit-sharing	plans, and other similar deb	ots	
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	√ No				
	☐ Yes				
4.13	MOUELA			00.770.00	
1.10	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0 0 0 4	\$6,772.00	
	Attn: Bankruptcy	When was the debt incurred?	8/1/2016		
	633 Spirit Dr	As of the date you file, the claim is	: Check all that apply.		
	Number Street	☐ Contingent			
	Chesterfield, MO 63005-1243 City State ZIP Code	☐ Unliquidated			
	City State ZIP Code	☐ Disputed			
	Who incurred the debt? Check one.	Time of NONDRIODITY improvinged	alaim.		
	Debtor 1 only	Type of NONPRIORITY unsecured ✓ Student loans	Ciaiifi:		
	Debtor 2 only	Student loansObligations arising out of a separ	ration agreement or diverse t	hat you did not report as	
	Debtor 1 and Debtor 2 only	priority claims	ation agreement or divorce t	nat you did not report as	
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Check if this claim is for a community debt	Other. Specify			
	Is the claim subject to offset?				
	☑ No				
	☐ Yes				

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Debtor 1

Sherese Allante

Document Talbert

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__ Case number (if known) __

First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	orth.	Total claim		
4.14	MOHELA	Last 4 digits of account number	0 0 0 6	\$6,660.00		
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2017			
	Attn: Bankruptcy	When was the debt incurred?	6/1/2017			
	633 Spirit Dr					
	Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Chesterfield, MO 63005-1243	☐ Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	Debtor 2 only	✓ Student loans				
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a sepa	ration agreement or divorce that	at you did not report as		
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	a plane, and other similar debte	•		
	☐ Check if this claim is for a community debt	Other. Specify	. .	•		
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.15	MOHELA	Last 4 digits of account number	0 0 0 7	\$5,531.00		
	Nonpriority Creditor's Name					
	Attn: Bankruptcy	When was the debt incurred?	8/1/2018			
	633 Spirit Dr					
	Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Chesterfield, MO 63005-1243	☐ Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☑ Student loans				
	Debtor 1 and Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	☐ At least one of the debtors and another	priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt		g plans, and other similar debt	5		
	Is the claim subject to offset?	. ,				
	√ No					
	☐ Yes					
4.16	1101151.4					
4.10	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0 0 0 5	\$4,516.00		
	' '	When was the debt incurred?	8/1/2017			
	Attn: Bankruptcy					
	633 Spirit Dr	As of the date you file, the claim is: Check all that apply.				
	Number Street	☐ Contingent				
	Chesterfield, MO 63005-1243 City State ZIP Code	☐ Unliquidated				
	,	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	claim:			
	Debtor 1 only	✓ Student loans				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	✓ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	At least one of the debtors and another	priority claims				
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	·	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Document Talbert Debtor 1 Sherese Allante __ Case number (if known) __ First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	orth.	Total claim		
4.17	MOHELA	Last 4 digits of account number	0 0 0 3	\$3,504.00		
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2016			
	Attn: Bankruptcy	When was the dest mountain.	0/1/2010			
	633 Spirit Dr	As of the date you file the claim is	a. Chaola all that anni.			
	Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Chesterfield, MO 63005-1243	☐ Contingent ☐ Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	☐ Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	Debtor 2 only	☑ Student loans				
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separ	ration agreement or divorce that	at you did not report as		
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	n plans, and other similar debts	3		
	☐ Check if this claim is for a community debt	Other. Specify	• •	,		
	Is the claim subject to offset?	<u> </u>				
	☑ No					
	☐ Yes					
4.18	MOHELA	Last 4 digits of account number	0 0 0 9	\$1,940.00		
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2019			
	Attn: Bankruptcy		6/ 1/2010			
	633 Spirit Dr	As of the date you file, the claim is	c. Chook all that apply			
	Number Street	Contingent	S: Check all that apply.			
	Chesterfield, MO 63005-1243	Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	a Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☑ Student loans				
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separ	ration agreement or divorce that	at you did not report as		
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	g plans, and other similar debts	3		
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?	•				
	√ No					
	☐ Yes					
4.19						
4.19	MOHELA	Last 4 digits of account number	0 0 1 1	\$210.00		
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2020			
	Attn: Bankruptcy					
	633 Spirit Dr	As of the date you file, the claim is	s: Check all that apply			
	Number Street	Contingent	or official and apply.			
	Chesterfield, MO 63005-1243	☐ Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	·				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	Debtor 2 only	☑ Student loans				
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	Other. Specify				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Last Name

Debtor 1

First Name

Document Talbert Allante Sherese Middle Name

_ Case number (if known) _

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. 4.20 Navient Last 4 digits of account number 4.2	Total claim
4.20 Novinet	
4.20 Navient Last 4 digits of account number 4 2	3 4 \$4,332.00
Nonpriority Creditor's Name When was the debt incurred? 10/1/	2007
Attn: Bankruptcy	
PO Box 9640 As of the date you file, the claim is: Check all	that apply
Number Street	та арру.
Wilkes-Barr, PA 18773-9640	
City State ZIP Code Disputed	
Who incurred the debt? Check one.	
✓ Debtor 1 only	
☐ Debtor 2 only ☐ Student loans	
☐ Debtor 1 and Debtor 2 only ☐ Obligations arising out of a separation agree priority claims	ment or divorce that you did not report as
At least one of the debtors and another Debts to pension or profit-sharing plans, and	other similar debts
☐ Check if this claim is for a community debt ☐ Other. Specify	
Is the claim subject to offset?	
☑ No	
☐ Yes	
4.21 Navient Last 4 digits of account number 4 2	4 2 \$3,950.00
Nonpriority Creditor's Name	<u> </u>
Attn: Bankruptcy When was the debt incurred? 2/11/2	2008
PO Box 9640	
Number Street As of the date you file, the claim is: Check all	that apply.
Wilkes-Barr, PA 18773-9640	
City State ZIP Code Unliquidated	
☐ Disputed	
Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim:	
Debtor I only	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only	ment or divorce that you did not report as
At least one of the debters and another priority claims	•
Check if this claim is for a community debt	
Other. Specify	
Is the claim subject to offset?	
☑ No □ Yes	
☐ Yes	
4.22 Navient Last 4 digits of account number 4 2	5 9 \$3,615.00
Nonpriority Creditor's Name When was the debt incurred? 10/1/	2008
Attn: Bankruptcy When was the dept incurred: 10/1/	2000
PO Box 9640	
Number Street As of the date you file, the claim is: Check all	that apply.
Wilkes-Barr, PA 18773-9640	
City State ZIP Code ☐ Unliquidated ☐ Disputed	
Who incurred the debt? Check one.	
☐ Debtor 1 only Type of NONPRIORITY unsecured claim:	
☐ Debtor 2 only ☐ Student loans	
☐ Debtor 1 and Debtor 2 only ☐ Obligations arising out of a separation agree	ment or divorce that you did not report as
☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and	other similar debts
☐ Check if this claim is for a community debt ☐ Other. Specify	
Is the claim subject to offset?	
☑ No	
☐ Yes	

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 Allante
 Sherese
 Talbert
 Case number (if known)

Debtor 1 Case number (if known) First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	orth.	Total claim		
4.23	Nordstrom FSB	Last 4 digits of account number	7 0 6 5	\$3,610.00		
	Nonpriority Creditor's Name	When was the debt incurred?	3/1/2019			
	ATTN: Bankruptcy					
	PO Box 6555	As of the date you file, the claim is	s: Check all that apply.			
	Number Street	☐ Contingent				
	Englewood, CO 80155-6555 City State ZIP Code	☐ Unliquidated				
	,	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	olaim:			
	Debtor 1 only	Student loans	Ciaiiii.			
	Debtor 2 only	Obligations arising out of a sepa	ration agreement or divorce th	at you did not report as		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims	ration agreement of divorce th	at you did not report as		
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing ✓ Other. Specify CreditCard	g plans, and other similar debt	S		
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.24	0. W. F		0 7 0 0	#40.000.00		
7.27	One Main Financial Nonpriority Creditor's Name	Last 4 digits of account number	0 7 0 3	\$13,029.00		
	• •	When was the debt incurred?	11/1/2020			
	Attn: Bankruptcy		· · · · · · · · · · · · · · · · · · ·			
	PO Box 3251	As of the date you file, the claim is	s: Check all that apply.			
	Number Street	☐ Contingent	,			
	Evansville, IN 47731	Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	T (NONDRIGHTY				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	ciaim:			
	Debtor 2 only	☐ Student loans		-t didt		
	Debtor 1 and Debtor 2 only	 Obligations arising out of a sepa priority claims 	ration agreement or divorce th	at you did not report as		
	At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	✓ Other. Specify Unsecured				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.25	Synchrony/PayPal Credit	Last 4 digits of account number	6 2 0 2	\$3,302.00		
	Nonpriority Creditor's Name	Last 4 digits of account number	6 2 9 2	φ3,302.00		
	Attn: Bankruptcy	When was the debt incurred?	11/1/2016			
	PO Box 965060 Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Orlando, FL 32896-5060	☐ Contingent				
	City State ZIP Code	Unliquidated				
	,	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:				
	Debtor 1 only	☐ Student loans				
	Debtor 2 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	priority claims				
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	2 Shook in this stand to for a community dept	✓ Other. Specify CreditCard				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Case number (if known) ___

Debtor 1

Allante Sherese Talbert
First Name Middle Name Last Name

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

					Total claim
Total claims	6a.	Domestic support obligations	6a.		\$0.00
Hom Part 1	6b.	Taxes and certain other debts you owe the government	6b.		\$859.81
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.	•	\$859.81
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		\$73,846.00
nom runt 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+	\$62,802.00
	6j.	Total. Add lines 6f through 6i.	6j.	•	\$136,648.00

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Fill in this information	n to identify your case	:		
Debtor 1	Allante	Sherese	Talbert	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	ruptcy Court for the:	Eas	tern District of Pennsylvani	a
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with wh	om you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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				<u>Document Pade</u>	<u> 32 01 40 </u>	
Fill in	this inforn	nation to identify yo	ur case:			
Debt	tor 1	Allante	Sherese	Talbert		
		First Name	Middle Name	Last Name		
Debt						
(Spo	use, it tiling)	First Name	Middle Name	Last Name		
Unite	ed States	Bankruptcy Court fo	or the: Easte	ern District of	Pennsylvania	
Case (if kn	e number					☐ Check if this is an
(amended filing
Offic	cial For	m 106H				
Sch	nedu	le H: You	ur Codebto	ors		12/15
iling t he en	ogether, l tries in th	ooth are equally re	esponsible for supplying	ng correct information. If me	ore space is needed, copy the	s possible. If two married people are Additional Page, fill it out, and number write your name and case number (if
1.	Do you h No Yes	nave any codebtor	s? (If you are filing a joi	nt case, do not list either spou	ise as a codebtor.)	
	California No. G Yes. I	i, Idaho, Louisiana, So to line 3. Did your spouse, fo	Nevada, New Mexico, F	Puerto Rico, Texas, Washingto	on, and Wisconsin.)	res and territories include Arizona, and current address of that person.
	N	lame of your spous	e, former spouse, or leg	al equivalent		
	N	lumber	Street			
	_					
	C	City	State	ZIP Code		
3.	2 again a	s a codebtor only	if that person is a gua	rantor or cosigner. Make su	ire you have listed the credito	with you. List the person shown in line r on <i>Schedule D</i> (Official Form 106D), or <i>Schedule G</i> to fill out Column 2.
	Column 1	: Your codebtor			Column 2: The cred	itor to whom you owe the debt
					Check all schedules	that apply:
3.1					Cabadula D. lina	
	Name				Schedule D, line	
	Number		Street		Schedule E/F, lin	
					Schedule G, line	
	City		State	ZII	P Code	
3.2						
	Name				Schedule D, line	
	Number		Street		Schedule E/F, lin	
					Schedule G, line	

ZIP Code

State

City

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			Dod	cument P	age'	e 33 of 4	<u>16</u>				
Fil	I in this information	to identify your ca	ase:								
D	ebtor 1	Allante	Sherese 1	albert							
		First Name	Middle Name La	ast Name							
	ebtor 2 Spouse, if filing)	First Name	Middle Name La	ast Name				С	heck if this is:		
	nited States Bankru			District of Penns	vlvar	ia			An amended filing	9	
	ase number	picy Court for the			y.ru.		•		A supplement sho	owing pos	tpetition
_	known)										o ronowing date
							<u> </u>		MM / DD / YYYY		
<u>O</u> 1	ficial Form	<u> 1061</u>									
So	chedule I:	Your In	come								12/15
spo add	use is not filing wit itional pages, write	h you, do not inc	filing jointly, and your spellude information about y case number (if known).	our spouse. If m	ore s	pace is nee					
1.	Fill in your emplo information.	yment		Debtor 1	l				Debtor 2 or nor	n-filing sp	ouse
	If you have more t	•	Employment status	☑ Employed	ı 🗆 k	lot Employe	ed	[□ Employed □ No	ot Employe	ed
	attach a separate information about		Occupation								
	employers. Include part time,	account or	Employer's name	Reliance Sta	ındaro	d Life Insura	ince Compa	ny			
	self-employed wo		Employer's address	1700 Market	C+ C+	o 1200	•				
	Occupation may in or homemaker, if i			Number Stree		e 1200			Number Street		
				Philadelphia,	, PA 1		7: 0 1		0''	01.1	7: 0 1
			How long employed the	City re?		State	Zip Code		City	State	Zip Code
			0 1 7								
Pa	art 2: Give Deta	ils About Mon	thly Income								
	Estimate monthly unless you are se		e date you file this form. I	f you have nothir	ng to	report for ar	ny line, write	\$0 in t	he space. Include y	our non-f	iling spouse
	If you or your non- more space, attac	o ,	e more than one employe et to this form.	r, combine the in	forma	ation for all	employers fo	or that p	person on the lines	below. If y	ou need
						For	Debtor 1		r Debtor 2 or n-filing spouse		
2.			and commissions (before loulate what the monthly w		2.	\$	57,539.67	_	\$0.00		
3.	Estimate and list	monthly overtime	e pay.		3.	+	\$0.00	+	\$0.00		

\$7,539.67

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Allante Sherese Talbert Case number (if known) ________
First Name Middle Name Last Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$7,539.67	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$2,214.11	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$452.39	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$549.28	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$398.47	\$0.00	
	5e. Insurance	5e.	\$461.94	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h.	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$4,076.19	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,463.48	\$0.00	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:	8h.	+ \$0.00	+ \$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$3,463.48	\$0.00	\$3,463.48
11.	State all other regular contributions to the expenses that you list in Scheo	lule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a			·	
	Specify:			. 11. -	\$ 0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics				\$3,463.48
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this for	orm?			
	☑ No. ☐ Yes. Explain:				

	Case 24-10882	1 Doc 1 Filed 03/15/ Document		16:53:08 D	esc Main
Fill in this	information to identify your car	se:			
Debtor 1	Allante First Name	Sherese Talbert Middle Name Last Name		ck if this is:	
Debtor 2 (Spouse,		Middle Name Last Name		An amended filing A supplement showir expenses as of the fo	g postpetition chapter 13 llowing date:
United S Case nu (if known)		Eastern District of		MM / DD / YYYY	-
Officia	l Form 106J				
Sche	dule J: Your Ex	kpenses			12/15
Part 1: 1. Is this 1. No Part 1:	Describe Your Household s a joint case? b. Go to line 2. s. Does Debtor 2 live in a sep No Yes. Debtor 2 must file	arate household? Official Form 106J-2, Expenses for		` 	own). Answer every question.
	ou have dependents? out list Debtor 1 and our 2.	✓ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do no name	t state the dependents' s.			_	No. Yes.
					No. Yes.
					- No. Yes.
					- No. Yes.
				_	No. Yes.
	our expenses include	☑ No □ _{Yes}			

Part 2: Estimate Your Ongoing Monthly Expenses

4d. Homeowner's association or condominium dues

yourself and your dependents?

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of Your expenses

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. If not included in line 4: 4a. 4a. Real estate taxes 4b. 4b. Property, homeowner's, or renter's insurance 4c. 4c. Home maintenance, repair, and upkeep expenses 4d.

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Debtor 1 Allante Sherese Talbert Case number (if known) ______

			Your expenses
5. Add	ditional mortgage payments for your residence, such as home equity loans	5.	\$0.00
6. Util i	ities:		
	Electricity, heat, natural gas	6a.	\$225.00
	Water, sewer, garbage collection	6b.	\$0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$245.00
	Other. Specify:	6d.	\$0.00
	od and housekeeping supplies	7.	\$1,618.00
	Idcare and children's education costs	8.	\$0.00
	thing, laundry, and dry cleaning	9.	\$245.00
		10.	\$175.00
	sonal care products and services		
	dical and dental expenses	11.	\$145.00
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12.	\$50.00
13. Ent	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$125.00
14. Ch a	aritable contributions and religious donations	14.	\$95.00
	urance. not include insurance deducted from your pay or included in lines 4 or 20.		
15a	. Life insurance	15a.	\$0.00
15b	. Health insurance	15b.	\$0.00
15c	. Vehicle insurance	15c.	\$0.00
15d	l. Other insurance. Specify:	15d.	\$0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$0.00
	tallment or lease payments:		
		17a.	\$0.00
	. Car payments for Vehicle 1	17b.	\$0.00
17b	. Car payments for Vehicle 2	17c.	
17c	. Other. Specify:	17d.	\$0.00
17d	l. Other. Specify:		\$0.00
	or payments of alimony, maintenance, and support that you did not report as deducted myour pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
19. Oth	er payments you make to support others who do not live with you.		
Spe	ecify:	19.	\$0.00
20. Oth	er real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a	. Mortgages on other property	20a.	\$0.00
	. Real estate taxes	20b.	\$0.00
	: Property, homeowner's, or renter's insurance	20c.	\$0.00
	I. Maintenance, repair, and upkeep expenses	20d.	\$90.00
20e	. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	tor 1	Allante	Sherese	Talbert	Case number (if know	n)
		First Name	Middle Name	Last Name		,
21.	Other. Spe	ecify:			21. +	\$0.00
22.	Calculate y	your monthly exp	enses.			
	22a. Add li	nes 4 through 21.			22a	\$3,013.00
	22b. Copy	line 22 (monthly e	expenses for Debtor 2),	f any, from Official Form 106J-2	22b	\$0.00
	22c. Add lii	ne 22a and 22b. T	he result is your month	y expenses.	22c	\$3,013.00
23.	Calculate y	your monthly net	income.			
	23а. Сору	line 12 (your com	bined monthly income)	rom Schedule I.	23a	\$3,463.48
	23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b	\$3,013.00
	23c. Subtra	act your monthly e	expenses from your mor	thly income.		
	The r	esult is your mont	hly net income.		23c	\$450.48
						_
24.	Do you ex	pect an increase of	or decrease in your exp	enses within the year after you fil	le this form?	
				car loan within the year or do you of a modification to the terms of you		
	☑ No. ☐ Yes.	None				

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Fill in this information	n to identify your case	:		
Debtor 1	Allante	Sherese	Talbert	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	Eas	tern District of Pennsy	Ivania
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$58,748.06
1c. Copy line 63, Total of all property on Schedule A/B	\$58,748.06
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$859.81
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$136,648.00
Your total liabilities	\$137,507.81
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,463.48
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,013.00

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Debtor 1 Allante Sherese Talbert Case purel

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

Case number (if known). First Name Middle Name Last Name Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$7,539.67 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$859.81 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$73,846.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$74,705.81

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Fill in this information	to identify your case	:		
Debtor 1	Allante	Sherese	Talbert	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	East	tern District of Pennsylvania	
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attor	ney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of periury I declare that I have read the curr	nmary and schedules filed with this declaration and that they are true and correct.
onder penalty of penalty, ruectare that i have read the sun	imaly and schedules filed with this declaration and that they are tide and correct.
X /s/ Allante Sherese Talbert	
Allante Sherese Talbert, Debtor 1	
Date 03/15/2024	
MM/ DD/ YYYY	

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Fill in this information to	o identify your case:				
Debtor 1	Allante	Sherese	Talbert		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		East	ern District of Pennsylvania		
Case number (if known)					☐ c

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marit	tal Status and Where Yo	ou Lived Before						
1. What is your current marital status?								
☐ Married								
✓ Not married								
2. During the last 3 years, have you lived ar	ovwhere other than where v	ou live now?						
✓ No	ywnere outer than where y	ou live now.						
Yes. List all of the places you lived in the	ne last 3 vears. Do not includ	le where you live now.						
Too. List all of the places you need in the	io lact o yourc. Do not mora	o whole you live how.						
3. Within the last 8 years, did you ever live								
territories include Arizona, California, Idaho,	Louisiana, Nevada, New Me	exico, Puerto Rico, Texas, V	Vashington, and Wisconsin.					
√ No								
☐ Yes. Make sure you fill out <i>Schedule H</i>	: Your Codebtors (Official Fo	orm 106H).						
Part 2: Explain the Sources of Your I	Income							
4. Did you have any income from employmers Fill in the total amount of income you receive If you are filing a joint case and you have inc	ed from all jobs and all busine	esses, including part-time a	ctivities.	ears?				
□ No								
✓ Yes. Fill in the details.								
	Debtor 1 Debtor 2							
	Sources of income Gross Income Gross Income Gross Income							
	Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
	☑ Wages, commissions,		☐ Wages, commissions,					
From January 1 of current year until the date you filed for bankruptcy:	bonuses, tips	\$19,608.32	bonuses, tips					

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Debtor 1	Allante First Name	Shere	Name	Talbert Last Name		Case number (if known)
	FIISLINAIIIE	Middle	iname	Last Name		
For last	calendar year:			es, commissions,	\$88,889.53	☐ Wages, commissions,
(Januar	y 1 to December		_	uses, tips	ф00,009.33	bonuses, tips
		YYYY	Opera	ating a business		Operating a business
	calendar year b			es, commissions, uses, tips	\$117,830.00	☐ Wages, commissions, bonuses, tips
		YYYY	Opera	ating a business		Operating a business
Include ind public ben filing a joir No Yes.	come regardless refit payments; p nt case and you Fill in the details	of whether that ensions; rental i have income that s.	income is ta ncome; inter at you receiv		other income are alimity collected from laws yonce under Debtor	ony; child support; Social Security, unemployment, and other uits; royalties; and gambling and lottery winnings. If you are 1.
6 Aro oith	or Dobtor 1's or	Dobtor 2's dobt	o primorily d	ongumer debte?		
				consumer debts?		
☐ No.				r ily consumer debts. ly, or household purpo		defined in 11 U.S.C. § 101(8) as "incurred by
			•	nkruptcy, did you pay		f \$7,575* or more?
	☐ No. Go to I	ine 7.				
	paid	that creditor. D	o not include		stic support obligation	e or more payments and the total amount you as, such as child support and alimony. Also, do
	* Subject to a	djustment on 4/0	1/25 and ev	ery 3 years after that	for cases filed on or a	after the date of adjustment.
√ Yes.	Debtor 1 or D	ebtor 2 or both	have nrimar	ily consumer debts.		
Y les.			•	nkruptcy, did you pay	any creditor a total of	f \$600 or more?
	☑ No. Go to I			.,, , , ,	,	
	Yes. List	below each cred	or domestic s	support obligations, su		total amount you paid that creditor. Do not and alimony. Also, do not include payments to
Insiders in you are ar operate as ✓ No	clude your relati officer, director	ves; any genera , person in contr or. 11 U.S.C. § 1	l partners; re	elatives of any general of 20% or more of the	al partners; partnershi eir voting securities; a	anyone who was an insider? ips of which you are a general partner; corporations of which and any managing agent, including one for a business you, such as child support and alimony.
Include pa	1 year before you				nts or transfer any p	roperty on account of a debt that benefited an insider?
√ No						
Yes.	List all payments	s that benefited	an insider.			

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Debtor 1 Allante Sherese Talbert Case Sumbos (f. January)

JODIOI I	Ananto	Oncrese	Tuibert	Case number (if known)
	First Name	Middle Name	Last Name	
Part 4:	Identify Legal Acti	ons, Repossessior	ns, and Foreclosures	
List all s				t action, or administrative proceeding? lection suits, paternity actions, support or custody modifications, and
☑ No	1			
Ye	s. Fill in the details.			
	in 1 year before you fil Il that apply and fill in th		s any of your property repossess	sed, foreclosed, garnished, attached, seized, or levied?
√ No	. Go to line 11.			
Ye	s. Fill in the information	below.		
	in 90 days before you to make a payment beca			or financial institution, set off any amounts from your accounts or
√ No				
Ye	s. Fill in the details.			
	in 1 year before you fil ed receiver, a custodia		s any of your property in the pos	session of an assignee for the benefit of creditors, a court-
√ No	1			
Ye	s			
Part 5:	List Certain Gifts a	and Contributions		
13. With	in 2 years before you f	iled for bankruptcy, di	d you give any gifts with a total v	value of more than \$600 per person?
√ No	•			
Ye	s. Fill in the details for e	ach gift.		
14. With № No		iled for bankruptcy, di	d you give any gifts or contributi	ions with a total value of more than \$600 to any charity?
_	s. Fill in the details for e	ach gift or contribution		
		g		
Part 6:	List Certain Losse	S		
15. With		ed for bankruptcy or s	ince you filed for bankruptcy, did	d you lose anything because of theft, fire, other disaster, or
√ No				
Ye	s. Fill in the details.			

Page 44 of 46 Document **Talbert** Debtor 1 Allante Sherese Case number (if known) _ First Name Middle Name Last Name List Certain Payments or Transfers Part 7: 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment Cibik Law, P.C. transfer was made Person Who Was Paid Attorney's Fee and Cost 3/15/2024 \$1,575.00 1500 Walnut Street Suite 900 Number Street Philadelphia, PA 19102 ZIP Code mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ✓ No Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **✓** No ☐ Yes. Fill in the details. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details.

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Doc 1

			Document	Page 45 o	f 46
ebtor 1	Allante	Sherese	Talbert		Case number (if known)
	First Name	Middle Name	Last Name		
21. Do yo		ou have within 1 year	before you filed for ba	nkruptcy, any saf	e deposit box or other depository for securities, cash, or other
√ No					
Yes	. Fill in the details.				
_	you stored property i	in a storage unit or pla	ace other than your ho	me within 1 year l	pefore you filed for bankruptcy?
✓No					
Yes	. Fill in the details.				
Part 9:	Identify Property \	You Hold or Contro	ol for Someone Else)	
23. Do yo	ou hold or control any	property that someo	ne else owns? Include	any property you	borrowed from, are storing for, or hold in trust for someone.
√ No					
Yes	. Fill in the details.				
	_				
Part 10:	Give Details Abou	ut Environmental I	nformation		
For the p	urpose of Part 10, the	e following definitions	apply:		
subs	tances, wastes, or mat		soil, surface water, gro		ation, contamination, releases of hazardous or toxic r medium, including statutes or regulations controlling the
	means any location, fa lize it, including dispos		efined under any enviro	nmental law, whe	ther you now own, operate, or utilize it or used to own, operate,
	ardous material means tant, contaminant, or s		ental law defines as a	nazardous waste,	hazardous substance, toxic substance, hazardous material,
Report al	ll notices, releases, ar	nd proceedings that ye	ou know about, regard	less of when they	occurred.
24. Has a	ny governmental unit	t notified you that you	may be liable or poter	ntially liable unde	r or in violation of an environmental law?
√ No					
Yes	. Fill in the details.				
25. Have	you notified any gove	ernmental unit of any	release of hazardous r	naterial?	
√ No					
Yes	. Fill in the details.				
26. Have	vou been a party in a	nv iudicial or adminis	trative proceeding und	ler anv environme	ental law? Include settlements and orders.
✓No	,	,,	3	, ,	
Yes	. Fill in the details.				

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	Case 24-1	L0881 Doc 1	Filed 03/15/24 Document	Entered 03/15/24 16:53:08 Desc Main Page 46 of 46		
Debtor 1	Allante	Sherese	Talbert	Case number (if known)		
	First Name	Middle Name	Last Name	Case Humber (ii known)		
Part 11:	Give Details Abou	ut Your Business o	or Connections to Ar	ny Business		
27 Within	a 4 years before you f	iled for bankruptey d	lid vou own a business e	or have any of the following connections to any business?		
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?						
☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	A partner in a partner					
	An officer, director, or	managing executive	of a corporation			
	An owner of at least 5	5% of the voting or equ	uity securities of a corpor	ation		
✓ No.	None of the above app	olies. Go to Part 12.				
☐ Yes.	Check all that apply a	above and fill in the de	tails below for each busin	ness.		
	n 2 years before you f , or other parties.	iled for bankruptcy, d	lid you give a financial s	statement to anyone about your business? Include all financial institutions,		
√INo	, o. oo. pao.					
_	Fill in the details belo	NA/				
<u> </u>	Till III the details belo	w.				
	Ī					
Part 12:	Sign Below					
and corre	ect. I understand that	making a false staten	nent, concealing propert	chments, and I declare under penalty of perjury that the answers are true ty, or obtaining money or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
X /s,	/ Allante Sherese Talb	ert				
• —	nature of Allante Sher					
Do	te 03/15/2024					
Da	03/13/2024					
-	ttach additional page	s to your Statement of	of Financial Affairs for In	ndividuals Filing for Bankruptcy (Official Form 107)?		
√ No						
Yes						
Did vou p	pay or agree to pay so	meone who is not an	attornev to help you fill	l out bankruptcy forms?		
√INo						
_	Name of manage			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).		
☐ Yes.	Name of person					